

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different
than previously
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

07

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		35850.65
(b) Cash on Hand at Beginning of Reporting Period	35229.10	
(c) Total Receipts (from Line 19)	85483.24	372128.20
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	120712.34	407978.85
7. Total Disbursements (from Line 31)	65643.00	352909.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	55069.34	55069.34
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	212824.11	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15645.00	46865.00
(i) Itemized (use Schedule A)	24311.00	95988.60
(ii) Unitemized	39956.00	142853.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	11000.00
(c) Other Political Committees (such as PACs)	39956.00	153853.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	19000.00	143456.53
13. All Loans Received	0.00	40000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	2032.08
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	118.75
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	26527.24	32667.24
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	26527.24	32667.24
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	85483.24	372128.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	58956.00	339460.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	8211.80	44220.01
(ii) Non-Federal Share.....	14598.75	78751.28
(b) Other Federal Operating Expenditures.....	24624.71	98411.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	47435.26	221382.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	24000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1600.00	1600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1600.00	1600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	16607.74	105926.91
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	16607.74	105926.91
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65643.00	352909.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51044.25	274158.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	39956.00	153853.60
34. Total Contribution Refunds (from Line 28(d))	1600.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38356.00	152253.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32836.51	142631.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2032.08
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32836.51	140599.24

SCHEDULE L (FEC Form 3X)

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AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party		
NAME OF ACCOUNT KEY LEVIN		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	3636.50	3636.50
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	3636.50	3636.50
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	3636.50	3636.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Wayne Brady

Mailing Address 4742 Liberty Rd South PMB 280

City

Salem

State

OR

Zip Code

97302-5000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80612.C95786

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Wayne Brady

Mailing Address 4742 Liberty Rd South PMB 280

City

Salem

State

OR

Zip Code

97302-5000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96223

Amount of Each Receipt this Period

30.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Stephan A. Brodhead

Mailing Address 7456 SW Baseline Road, PMB 110

City

Hillsboro

State

OR

Zip Code

97123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

155.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80612.C95780

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Stephan A. Brodhead

Mailing Address 7456 SW Baseline Road, PMB 110

City

Hillsboro

State

OR

Zip Code

97123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96337

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Rozelyn Brown

Mailing Address 787 Airport Drive

City

Cave Junction

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96207

Amount of Each Receipt this Period

270.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Rozelyn Brown

Mailing Address 787 Airport Drive

City

Cave Junction

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96311

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Donna Cain

Mailing Address 6580 E Evans Creek Rd

City

Rogue River

State

OR

Zip Code

97537-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80612.C95785

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Esther Conklin

Mailing Address 14270 NW Jackson School Rd

City

North Plains

State

OR

Zip Code

97133-8363

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Shadybrook Lumber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 8

Transaction ID: 80618.C96119

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Charlene A. Crocker

Mailing Address 4081 Alderbrook Ave SE

City

Salem

State

OR

Zip Code

97302-3847

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer (CCRW)

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: 80618.C95949

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Charlene A. Crocker

Mailing Address 4081 Alderbrook Ave SE

City

Salem

State

OR

Zip Code

97302-3847

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer (CCRW)

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 7 / 2 0 0 8

Transaction ID: 80710.C96349

Amount of Each Receipt this Period

5.00

Receipt

B.

Full Name (Last, First, Middle Initial)

William Curtright

Mailing Address PO Box 1350

City

Jefferson

State

OR

Zip Code

97352-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ames Research Laboratories

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96183

Amount of Each Receipt this Period

135.00

Receipt

C.

Full Name (Last, First, Middle Initial)

William Curtright

Mailing Address PO Box 1350

City

Jefferson

State

OR

Zip Code

97352-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ames Research Laboratories

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

185.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 7 / 2 0 0 8

Transaction ID: 80710.C96347

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

William Curtright

Mailing Address PO Box 1350

City

Jefferson

State

OR

Zip Code

97352-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ames Research Laboratories

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2685.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96362

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Vance Day

Mailing Address PO Box 546

City

Salem

State

OR

Zip Code

97308-0546

FEC ID number of contributing
federal political committee.

C

Name of Employer
Adams, Day, Hill

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: 80710.C96237

Amount of Each Receipt this Period

195.00

Receipt

C.

Full Name (Last, First, Middle Initial)

David Eaton

Mailing Address 1507 SE Riviera Dr., PO Box 5934

City

Bend

State

OR

Zip Code

97708

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProDx

Occupation
Computer programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96357

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Andrew Ferguson

Mailing Address 1188 Cherry Circle

City

Lake Oswego

State

OR

Zip Code

97034-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96359

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kerry Ferguson

Mailing Address 2588 Ridgmont Drive

City

Eugene

State

OR

Zip Code

97405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96289

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Bonnie J. Ford

Mailing Address PO Box 1183

City

Roseburg

State

OR

Zip Code

97470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96133

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

William Gander

Mailing Address 5240 SE 82nd Ave.

City

Portland

State

OR

Zip Code

97266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Standard TV & Appliance

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96363

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Fred Granum

Mailing Address 13585 NW Lariat Court

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Co-Operations, Inc.

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96354

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

June Hartley

Mailing Address PO Box 2643
3149 Shay Way

City

Nyssa

State

OR

Zip Code

97913-0643

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8

Transaction ID: 80710.C96268

Amount of Each Receipt this Period

125.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 69

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Linda Hellenthal

Mailing Address 10190 N. Umpqua Hwy

City

Roseburg

State

OR

Zip Code

97470-7947

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Dental Hygienist

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	8

Transaction ID: 80710.C96212

Amount of Each Receipt this Period

270.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Cari Herber

Mailing Address 14720 SE 119th Ave

City

Clackamas

State

OR

Zip Code

97015-9239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Landcorp Construction

Occupation

Office Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	8

Transaction ID: 80710.C96217

Amount of Each Receipt this Period

125.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Pii S. Hwang

Mailing Address 2661 NW 128th Court

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phillips and Company

Occupation

financial advisor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: 80710.C96365

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

895.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Jamie Jackson

Mailing Address 496 13th St NE

City

Salem

State

OR

Zip Code

97301-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: 80710.C96255

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jamie Jackson

Mailing Address 496 13th St NE

City

Salem

State

OR

Zip Code

97301-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8

Transaction ID: 80710.C96262

Amount of Each Receipt this Period

135.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Jamie Jackson

Mailing Address 496 13th St NE

City

Salem

State

OR

Zip Code

97301-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96313

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Anthony Lopez

Mailing Address 4145 Rice Valley Road

City State Zip Code
Oakland OR 97462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96287

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Warren Merz

Mailing Address 4020 Little Applegate Rd

City State Zip Code
Jacksonville OR 97530-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95798

Amount of Each Receipt this Period

80.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Warren Merz

Mailing Address 4020 Little Applegate Rd

City State Zip Code
Jacksonville OR 97530-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96187

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Warren Merz

Mailing Address 4020 Little Applegate Rd

City

Jacksonville

State

OR

Zip Code

97530-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96186

Amount of Each Receipt this Period

55.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Warren Merz

Mailing Address 4020 Little Applegate Rd

City

Jacksonville

State

OR

Zip Code

97530-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96189

Amount of Each Receipt this Period

55.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Dennis Morgan

Mailing Address 36249 Peel Ln

City

Springfield

State

OR

Zip Code

97478-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Forest Products Research
Lab

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96204

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Dennis Morgan

Mailing Address 36249 Peel Ln

City

Springfield

State

OR

Zip Code

97478-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Forest Products Research
Lab

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96358

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Tari Morse

Mailing Address 33080 SE Peoria Rd

City

Corvallis

State

OR

Zip Code

97333-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: 80618.C95936

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Tim Nashif

Mailing Address 4035 NE 91st Ave

City

Portland

State

OR

Zip Code

97220-5052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gateway Communications

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96294

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Tim Nashif

Mailing Address 4035 NE 91st Ave

City

Portland

State

OR

Zip Code

97220-5052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gateway Communications

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96360

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert Neighbor

Mailing Address 2130 SW Jefferson St Ste 315

City

Portland

State

OR

Zip Code

97201-7711

FEC ID number of contributing
federal political committee.

C

Name of Employer
RW Neighbor and Co.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 6 / 2 0 0 8

Transaction ID: 80618.C96087

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Newhouse

Mailing Address 1120 SW 1st St

City

Dundee

State

OR

Zip Code

97115-9502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

145.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: 80710.C96253

Amount of Each Receipt this Period

130.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

John Newhouse

Mailing Address 1120 SW 1st St

City

Dundee

State

OR

Zip Code

97115-9502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8

Transaction ID: 80710.C96263

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Helen Scott

Mailing Address 346 Bickford Dr

City

Grants Pass

State

OR

Zip Code

97527-9603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Book store owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96228

Amount of Each Receipt this Period

220.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sarah Seale

Mailing Address 12691 SE 137th Dr

City

Clackamas

State

OR

Zip Code

97086-5875

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: 80710.C96236

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Marylin Shannon

Mailing Address 7955 Portland Rd NE

City

Brooks

State

OR

Zip Code

97305-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95805

Amount of Each Receipt this Period

125.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Marylin Shannon

Mailing Address 7955 Portland Rd NE

City

Brooks

State

OR

Zip Code

97305-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96222

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Marylin Shannon

Mailing Address 7955 Portland Rd NE

City

Brooks

State

OR

Zip Code

97305-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 8

Transaction ID: 80710.C96269

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Marylin Shannon

Mailing Address 7955 Portland Rd NE

City

Brooks

State

OR

Zip Code

97305-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96307

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Elaine Smith

Mailing Address 30597 N. River Road

City

Prairie City

State

OR

Zip Code

97869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96293

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Peter Stott

Mailing Address 2896 SW Patton Road

City

Portland

State

OR

Zip Code

97204-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crown Pacific

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: 80710.C96276

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Nancy Stout

Mailing Address 1425 NE Sommer Drive

City

State

Zip Code

Grants Pass

OR

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95815

Amount of Each Receipt this Period

135.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Nancy Stout

Mailing Address 1425 NE Sommer Drive

City

State

Zip Code

Grants Pass

OR

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95814

Amount of Each Receipt this Period

135.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Nancy Stout

Mailing Address 1425 NE Sommer Drive

City

State

Zip Code

Grants Pass

OR

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96302

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Nancy Stout

Mailing Address 1425 NE Sommer Drive

City

State

Zip Code

Grants Pass

OR

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96304

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Nancy Stout

Mailing Address 1425 NE Sommer Drive

City

State

Zip Code

Grants Pass

OR

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96303

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Karl Thatcher

Mailing Address 1724 Chemawa Rd. NE

City

State

Zip Code

Keizer

OR

97303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Highway Specialties

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96355

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Karl Thatcher

Mailing Address 1724 Chemawa Rd. NE

City

Keizer

State

OR

Zip Code

97303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Highway Specialties

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 80710.C96356

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Dennis Tooley

Mailing Address 2440 NW Williams Loop

City

Redmond

State

OR

Zip Code

97756-9198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80710.C96214

Amount of Each Receipt this Period

185.00

Receipt

C.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

Grants Pass

State

OR

Zip Code

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95804

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

State

Zip Code

Grants Pass

OR

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95803

Amount of Each Receipt this Period

135.00

Receipt

B.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

State

Zip Code

Grants Pass

OR

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95800

Amount of Each Receipt this Period

135.00

Receipt

C.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

State

Zip Code

Grants Pass

OR

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95802

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional)

405.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

State

Zip Code

Grants Pass

OR

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95801

Amount of Each Receipt this Period

135.00

Receipt

B.

Full Name (Last, First, Middle Initial)

J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City

State

Zip Code

Grants Pass

OR

97527-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 80612.C95813

Amount of Each Receipt this Period

135.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Greg Wooldridge

Mailing Address 1221 SW 10th Avenue, #1210

City

State

Zip Code

Portland

OR

97205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Federal Express

Occupation

Flight Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: 80710.C96241

Amount of Each Receipt this Period

270.00

Receipt

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 69

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Greg Wooldridge

Mailing Address 1221 SW 10th Avenue, #1210

City State Zip Code
 Portland OR 97205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Federal Express

Occupation
Flight Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 3 / 2 0 0 8

Transaction ID: 80710.C96328

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

15645.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 69

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First St SE

City

Washington

State

DC

Zip Code

20003-

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer
Republican National Commi-
tee

Occupation

Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 8

Transaction ID: 80710.C96275

Amount of Each Receipt this Period

19000.00

Transfers From Affil./Aut-
h.

SUBTOTAL of Receipts This Page (optional)

19000.00

TOTAL This Period (last page this line number only)

19000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Key Bank	Transaction ID: 80710.E14039 Date of Disbursement
Mailing Address PO Box 22114	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 8</div> </div>
City Albany State NY Zip Code 12201- Purpose of Disbursement Bank Fees Candidate Name	Amount of Each Disbursement this Period <div>220.64</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> <div>BANK FEES</div>
B. Full Name (Last, First, Middle Initial) Benson Hotel	Transaction ID: 80618.E13862 Date of Disbursement
Mailing Address 309 SW Broadway	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97205- Purpose of Disbursement Facility Rental Candidate Name	Amount of Each Disbursement this Period <div>671.64</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> <div>FACILITY RENTAL</div>
C. Full Name (Last, First, Middle Initial) Carley Dillon	Transaction ID: 80612.E13840 Date of Disbursement
Mailing Address 14511 Pfeifer Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 8</div> </div>
City Lake Oswego State OR Zip Code 97035-2419 Purpose of Disbursement Reimbursement--See below Candidate Name	Amount of Each Disbursement this Period <div>856.37</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> <div>REIMBURSEMENT--SEE BELOW</div>

SUBTOTAL of Disbursements This Page (optional)

1748.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 69

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 7855 SW Dartmouth Rd

City Tigard State OR Zip Code 97223-8401

Purpose of Disbursement
Food/beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13895

Date of Disbursement

/ /

Amount of Each Disbursement this Period

47.50

[MEMO ITEM]

MEMO: FOOD/BEVERAGE

B.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 7855 SW Dartmouth Rd

City Tigard State OR Zip Code 97223-8401

Purpose of Disbursement
Food/beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13894

Date of Disbursement

/ /

Amount of Each Disbursement this Period

578.98

[MEMO ITEM]

MEMO: FOOD/BEVERAGE

C.

Full Name (Last, First, Middle Initial)
Carley Dillon

Mailing Address 14511 Pfeifer Dr

City Lake Oswego State OR Zip Code 97035-2419

Purpose of Disbursement
Reimbursement--OR GOP Food

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13888

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.50

REIMBURSEMENT--OR GOP FOOD

SUBTOTAL of Disbursements This Page (optional)

43.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 69

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 80612.E13832 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
LIST RENTAL																					
B. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 80710.E13925 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
LIST RENTAL																					
C. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 80710.E13927 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental	<table border="1"> <tr> <td colspan="10">3715.76</td> </tr> </table>	3715.76																			
3715.76																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
LIST RENTAL																					

SUBTOTAL of Disbursements This Page (optional)

4215.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Discover Corporate Card <hr/> Mailing Address PO Box 30423 <hr/> City Salt Lake City State UT Zip Code 84130-0423 <hr/> Purpose of Disbursement See below Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80612.E13843 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div>
Amount of Each Disbursement this Period <div>500.00</div>	SEE BELOW
B. Full Name (Last, First, Middle Initial) Alaska Airlines <hr/> Mailing Address 530 SW Madison St <hr/> City Portland State OR Zip Code 97204-1021 <hr/> Purpose of Disbursement Travel Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80612.E13845 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div>
Amount of Each Disbursement this Period <div>169.80</div>	[MEMO ITEM] MEMO: TRAVEL EXPENSES
C. Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 10520 SW Cascade Blvd <hr/> City Tigard State OR Zip Code 97223- <hr/> Purpose of Disbursement Office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80612.E13849 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div>
Amount of Each Disbursement this Period <div>119.98</div>	[MEMO ITEM] MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ►

500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13876

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1956.00

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

620.00

FUNDRAISING PHONE CALLS -
OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13875

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.00

FUNDRAISING PHONE CALLS -
OR GOP

SUBTOTAL of Disbursements This Page (optional)

2701.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13931

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13929

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FUNDRAISING PHONE CALLS -
OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13933

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FUNDRAISING PHONE CALLS -
OR GOP

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80710.E13935

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.00

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80710.E13937

Date of Disbursement

/ /

Amount of Each Disbursement this Period

160.00

FUNDRAISING PHONE CALLS -
OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80710.E13939

Date of Disbursement

/ /

Amount of Each Disbursement this Period

680.00

FUNDRAISING PHONE CALLS -
OR GOP

SUBTOTAL of Disbursements This Page (optional)

880.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Brianne Hyder Mailing Address 7068 SW Valenta Ct	Transaction ID: 80612.E13836 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div>
City Portland State OR Zip Code 97223- Purpose of Disbursement Reimbursement--See below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>211.16</div> REIMBURSEMENT--SEE BELOW
B. Full Name (Last, First, Middle Initial) AT&T Wireless Mailing Address PO Box 30459 City Los Angeles State CA Zip Code 90030- Purpose of Disbursement Phone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80710.E14000 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>211.16</div> [MEMO ITEM] MEMO: PHONE EXPENSE
C. Full Name (Last, First, Middle Initial) Brianne Hyder Mailing Address 7068 SW Valenta Ct City Portland State OR Zip Code 97223- Purpose of Disbursement Reimbursement--Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80618.E13881 Date of Disbursement <div> <div>06</div> <div>09</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>128.64</div> REIMBURSEMENT--OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ►

339.80

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
LifeWise

Mailing Address 815 SW Bond St

City Bend State OR Zip Code 97702-

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13907

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

708.90

INSURANCE

B.

Full Name (Last, First, Middle Initial)
Key Merchants

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E14036

Date of Disbursement

06 / 02 / 2008

Amount of Each Disbursement this Period

516.57

CREDIT CARD FEE

C.

Full Name (Last, First, Middle Initial)
Andrew J. Over

Mailing Address 1485 SW 134th Ave

City Beaverton State OR Zip Code 97005-0986

Purpose of Disbursement
Reimbursement--See below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13960

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

1381.32

REIMBURSEMENT--SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

2606.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Expedia, Inc.

Mailing Address 3150 139th Avenue SE

City Bellevue State WA Zip Code 98005-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13982

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

283.69

[MEMO ITEM]

MEMO: TRAVEL

B.

Full Name (Last, First, Middle Initial)
Hyatt Regency Tamaya

Mailing Address 1300 Tuyuna Trail

City Bernalillo State NM Zip Code 87004-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13974

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

17.05

[MEMO ITEM]

MEMO: TRAVEL

C.

Full Name (Last, First, Middle Initial)
Hyatt Regency Tamaya

Mailing Address 1300 Tuyuna Trail

City Bernalillo State NM Zip Code 87004-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13983

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

510.75

[MEMO ITEM]

MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Hyatt Regency Tamaya

Mailing Address 1300 Tuyuna Trail

City Bernalillo State NM Zip Code 87004-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13975

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

17.31

[MEMO ITEM]

MEMO: TRAVEL

B.

Full Name (Last, First, Middle Initial)

Kinkos

Mailing Address 2595 Commercial SE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13971

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

50.15

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address 10520 SW Cascade Blvd

City Tigard State OR Zip Code 97223-

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13976

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

31.99

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address 10520 SW Cascade Blvd

City Tigard State OR Zip Code 97223-

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13964

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.99

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Pitney Bowes Purchase Power

Mailing Address PO Box 856042

City Louisville State KY Zip Code 40285-

Purpose of Disbursement
Postage - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80612.E13833

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

POSTAGE - OR GOP

C.

Full Name (Last, First, Middle Initial)
Pitney Bowes Purchase Power

Mailing Address PO Box 856042

City Louisville State KY Zip Code 40285-

Purpose of Disbursement
Postage - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13873

Date of Disbursement

/ /

Amount of Each Disbursement this Period

293.00

POSTAGE - OR GOP

SUBTOTAL of Disbursements This Page (optional)

1293.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Gary Schmidt Mailing Address 14462 SE Bridgeton Street	Transaction ID: 80710.E13955 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 8</div> </div>
City Clackamas State OR Zip Code 97015- Purpose of Disbursement Reimbursement--See below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>166.94</div> REIMBURSEMENT--SEE BELOW
B. Full Name (Last, First, Middle Initial) Office Depot Mailing Address 10520 SW Cascade Blvd City Tigard State OR Zip Code 97223- Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80710.E13957 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>64.96</div> [MEMO ITEM] MEMO: OFFICE SUPPLIES
C. Full Name (Last, First, Middle Initial) Tiffany Stark Mailing Address PO Box 13470 City Portland State OR Zip Code 97213- Purpose of Disbursement Finance consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80710.E13922 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1708.88</div> FINANCE CONSULTING

SUBTOTAL of Disbursements This Page (optional)

1875.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Stacy Thomsen	Transaction ID: 80612.E13841 Date of Disbursement																				
Mailing Address 4949 Meadows Road, Ste. 625	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Lake Oswego State OR Zip Code 97035- Purpose of Disbursement Reimbursement--See below Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1230.00</td> </tr> </table>	1230.00																			
1230.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type REIMBURSEMENT--SEE BELOW																				
B. Full Name (Last, First, Middle Initial) Busters Texas Style BBQ	Transaction ID: 80618.E13892 Date of Disbursement																				
Mailing Address 11419 SW Pacific Highway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Portland State OR Zip Code 97223- Purpose of Disbursement OR GOP Catering Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1230.00</td> </tr> </table>	1230.00																			
1230.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM] MEMO: OR GOP CATERING																				
C. Full Name (Last, First, Middle Initial) Stacy Thomsen	Transaction ID: 80710.E13953 Date of Disbursement																				
Mailing Address 4949 Meadows Road, Ste. 625	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
City Lake Oswego State OR Zip Code 97035- Purpose of Disbursement Reimbursement--Postage Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">136.65</td> </tr> </table>	136.65																			
136.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type REIMBURSEMENT--POSTAGE																				

SUBTOTAL of Disbursements This Page (optional)

1366.65

TOTAL This Period (last page this line number only)

24531.97

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Geary

Mailing Address 1211 SW 5th Ave Ste 2980

City
Portland

State
OR

Zip Code
97204-3729

Purpose of Disbursement
Refund of Contribution Refund of Contrib

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1600.00

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

1600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Barbs Professional Bookkeeping &Tax

Mailing Address 3295 Triangle Dr. SE #112

City State Zip Code
Salem OR 97302-

Purpose of Disbursement
FEA Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13914

Date of Disbursement

M M / D D / Y Y Y Y
06 / 27 / 2008

Amount of Each Disbursement this Period

962.50

FEA PAYROLL SERVICES

B. Full Name (Last, First, Middle Initial)
Brienne Hyder

Mailing Address 7068 SW Valenta Ct

City State Zip Code
Portland OR 97223-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13882

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2008

Amount of Each Disbursement this Period

1870.93

FEA PAYROLL

C. Full Name (Last, First, Middle Initial)
Brienne Hyder

Mailing Address 7068 SW Valenta Ct

City State Zip Code
Portland OR 97223-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13944

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2008

Amount of Each Disbursement this Period

1870.93

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4704.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13887

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2008

Amount of Each Disbursement this Period

1901.63

FEA PAYROLL TAXES

B. Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13886

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2008

Amount of Each Disbursement this Period

676.19

FEA PAYROLL TAXES

C. Full Name (Last, First, Middle Initial)
Andrew J. Over

Mailing Address 1485 SW 134th Ave

City Beaverton State OR Zip Code 97005-0986

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13884

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2008

Amount of Each Disbursement this Period

2378.11

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4955.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Andrew J. Over

Mailing Address 1485 SW 134th Ave

City State Zip Code
Beaverton OR 97005-0986

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13942

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2008

Amount of Each Disbursement this Period

2378.11

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Gary Schmidt

Mailing Address 14462 SE Bridgeton Street

City State Zip Code
Clackamas OR 97015-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80710.E13940

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2008

Amount of Each Disbursement this Period

1885.53

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Smith Barney Investments

Mailing Address 121 SW Morrison St Ste 1600

City State Zip Code
Portland OR 97204-

Purpose of Disbursement
FEA IRA Contributions

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80618.E13885

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2008

Amount of Each Disbursement this Period

443.75

FEA IRA CONTRIBUTIONS

SUBTOTAL of Disbursements This Page (optional)

4707.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Smith Barney Investments	Transaction ID: 80710.E13943 Date of Disbursement
Mailing Address 121 SW Morrison St Ste 1600	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97204-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA IRA Contributions Candidate Name	<div> <div>443.75</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA IRA CONTRIBUTIONS
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Janice Williamson	Transaction ID: 80618.E13883 Date of Disbursement
Mailing Address 4065 Mandy Ave SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div>
City Salem State OR Zip Code 97302-1712	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div>898.15</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Janice Williamson	Transaction ID: 80710.E13941 Date of Disbursement
Mailing Address 4065 Mandy Ave SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div>
City Salem State OR Zip Code 97302-1712	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div>898.16</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

2240.06

TOTAL This Period (last page this line number only)

16607.74

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80213.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial)
F. Douglas Day

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 4386 Rowan Ave N

City Keizer State OR ZIP Code 97303-5824

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 4Y Y Y Y
2 0 0 8

20080630

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 50 / 69

FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial)
Michael Scheel

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial)
Donald Malarkey

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem State OR ZIP Code 97302-3733

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial)
Julie Scheel

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

40000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AristotleNature of Debt (Purpose):
Software & support

Mailing Address 205 Pennsylvania Ave SE

City State ZIP Code
Washington DC 20003-

Outstanding Balance Beginning This Period

1950.00

Transaction ID: LS80710.E13918

Amount Incurred This Period

1950.00

Payment This Period

1950.00

Outstanding Balance at Close of This Period

1950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS ConnectNature of Debt (Purpose):
Fundraising Phone Calls -
OR GOP

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

42015.14

Transaction ID: LS80618.E13875

Amount Incurred This Period

10542.00

Payment This Period

10542.00

Outstanding Balance at Close of This Period

42015.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
List rental

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

13628.27

Transaction ID: LS80612.E13832

Amount Incurred This Period

3715.76

Payment This Period

4215.76

Outstanding Balance at Close of This Period

13128.27

1) SUBTOTALS This Period This Page (optional).....

57093.41

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Electric LightwaveNature of Debt (Purpose):
Correction for overbilling

Mailing Address PO Box 20553

City State ZIP Code
Rochester NY 14602-

Outstanding Balance Beginning This Period

348.88

Transaction ID: LS80715.E14060

Amount Incurred This Period

-348.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage Machine Lease

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

1343.35

Transaction ID: LS80612.E13833

Amount Incurred This Period

6089.09

Payment This Period

2293.00

Outstanding Balance at Close of This Period

5139.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kevin HoarNature of Debt (Purpose):
Database Consulting

Mailing Address 12563 NW Millford St

City State ZIP Code
Portland OR 97229-9303

Outstanding Balance Beginning This Period

2419.66

Transaction ID: LS71218.E13369

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2419.66

1) **SUBTOTALS** This Period This Page (optional).....

7559.10

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 55 / 69

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T WirelessNature of Debt (Purpose):
Telephone/Total debt in
dispute

Mailing Address PO Box 30459

City State ZIP Code
Los Angeles CA 90030-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LSE11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Freres Lumber Co. Inc.Nature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 276

City State ZIP Code
Lyons OR 97358-0276

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS71120.E13313

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Corporate CardNature of Debt (Purpose):
CC debt 02/08

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

6575.92

Transaction ID: LS80612.E13842

Amount Incurred This Period

-194.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

6381.17

1) SUBTOTALS This Period This Page (optional).....

76062.07

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 56 / 69

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Barbs Professional Bookkeeping &TaxNature of Debt (Purpose):
FEA Payroll Services

Mailing Address 3295 Triangle Dr. SE #112

City State ZIP Code
Salem OR 97302-

Outstanding Balance Beginning This Period

962.50

Transaction ID: LS80710.E13914

Amount Incurred This Period

0.00

Payment This Period

962.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mowry ConsultingNature of Debt (Purpose):
Correction for overbilling

Mailing Address 13913 SE Hampshire Court

City State ZIP Code
Clackamas OR 97015-

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS80717.E14066

Amount Incurred This Period

-2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IN Compliance Inc.Nature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 751271

City State ZIP Code
Las Vegas NV 89131-

Outstanding Balance Beginning This Period

18381.30

Transaction ID: LS80618.E13874

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

15381.30

1) **SUBTOTALS** This Period This Page (optional).....

15381.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 57 / 69

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Card - FederalNature of Debt (Purpose):
Auto Exps & Off Supp/CC
DEBT 4/07

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

1106.84

Transaction ID: LS70801.E12961

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1106.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Card - FederalNature of Debt (Purpose):
OGOP Office Supplies/ CC
DEBT 11/07

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

360.35

Transaction ID: LS71220.E13392

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lynx Group Inc.Nature of Debt (Purpose):
OR GOP Printing

Mailing Address 2746 Front St Ne

City State ZIP Code
Salem OR 97301-

Outstanding Balance Beginning This Period

493.00

Transaction ID: LS80612.E13828

Amount Incurred This Period

0.00

Payment This Period

493.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

1467.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 58 / 69

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
D.R. Johnson Lumber Co.Nature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 66

City State ZIP Code
Riddle OR 97469-

Outstanding Balance Beginning This Period

10000.00

Transaction ID: LS71120.E13314

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
World Trade Center & CateringNature of Debt (Purpose):
Catering/ORGOP

Mailing Address PO Box 3340

City State ZIP Code
Portland OR 97208-

Outstanding Balance Beginning This Period

5761.04

Transaction ID: LS80612.E13834

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

4761.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Complete CampaignsNature of Debt (Purpose):
Database system

Mailing Address 610 Gateway Center Way Ste K

City State ZIP Code
San Diego CA 92102-4548

Outstanding Balance Beginning This Period

750.00

Transaction ID: LS80612.E13837

Amount Incurred This Period

572.25

Payment This Period

822.25

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional).....

15261.04

2) **TOTALS** This Period (last page this line number only).....

172824.11

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

40000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

212824.11

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 59 / 69
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT
 OREGON FEDERAL 1706
 F-Key c/o Key Ban

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

1642.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1642.24

Transaction ID: H380710.C96145

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 60 / 69
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON FEDERAL 1706
F-Key c/o Key Ban

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

TOTAL AMOUNT TRANSFERRED

24885.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

24885.00

Transaction ID: H380710.C96170

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

26527.24

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

26527.24

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Lynx Group Inc.

Mailing Address

2746 Front St Ne

City State Zip Code

Salem OR 97301-

Purpose of Disbursement:

OR GOP Printing

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

106653.74

Date MM / DD / YYYY 06 / 03 / 2008

Transaction ID: H480612.E13828

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

177.48

315.52

493.00

B. Full Name (Last, First, Middle Initial)

World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:

Catering/ORGOP

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

106903.74

Date MM / DD / YYYY 06 / 03 / 2008

Transaction ID: H480612.E13834

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

C. Full Name (Last, First, Middle Initial)

Red Lion Hotel

Mailing Address

3301 Market Street NE

City State Zip Code

Salem OR 97301-

Purpose of Disbursement:

OR GOP Facility Rental

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

106160.74

Date MM / DD / YYYY 06 / 03 / 2008

Transaction ID: H480612.E13835

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2160.00

3840.00

6000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2427.48

4315.52

6743.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Complete Campaigns

Mailing Address

610 Gateway Center Way Ste K

City	State	Zip Code
San Diego	CA	92102-4548

Purpose of Disbursement:
 Database system

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

107153.74

Date

M	M
0	6

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480612.E13839

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

B. Full Name (Last, First, Middle Initial)
 Red Lion Hotel

Mailing Address

3301 Market Street NE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
 OR GOP Facility Rental

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

111413.17

Date

M	M
0	6

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480618.E13860

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1533.39		2726.04		4259.43

C. Full Name (Last, First, Middle Initial)
 World Trade Center & Catering

Mailing Address

PO Box 3340

City	State	Zip Code
Portland	OR	97208-

Purpose of Disbursement:
 Catering/ORGOP

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115663.17

Date

M	M
0	6

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480618.E13870

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1713.39		3046.04		4759.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Warren Wilson

Mailing Address

962 62nd Court NE

City State Zip Code
 Salem OR 97317-

Purpose of Disbursement:
 Computer support

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116023.17

Date M M / D D / Y Y Y Y
 06 / 09 / 2008

Transaction ID: H480618.E13871

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

129.60

230.40

360.00

B. Full Name (Last, First, Middle Initial)
 IN Compliance Inc.

Mailing Address

PO Box 751271

City State Zip Code
 Las Vegas NV 89131-

Purpose of Disbursement:
 Compliance Consulting

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115413.17

Date M M / D D / Y Y Y Y
 06 / 09 / 2008

Transaction ID: H480618.E13874

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1080.00

1920.00

3000.00

C. Full Name (Last, First, Middle Initial)
 W.B. Adams Insurance

Mailing Address

9900 SW Greenburg Rd Suite 270

City State Zip Code
 Portland OR 97223-

Purpose of Disbursement:
 Insurance

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117564.92

Date M M / D D / Y Y Y Y
 06 / 18 / 2008

Transaction ID: H480710.E13905

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

555.03

986.72

1541.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1764.63

3137.12

4901.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 W.B. Adams Insurance

Mailing Address

9900 SW Greenburg Rd Suite 270

City State Zip Code

Portland OR 97223-

Purpose of Disbursement:
 Insurance

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117632.92

Date M M / D D / Y Y Y Y
 06 / 18 / 2008

Transaction ID: H480710.E13906

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

24.48

43.52

68.00

B. Full Name (Last, First, Middle Initial)
 Eagle Teleconferencing

Mailing Address

207 West Washington Street

City State Zip Code

Rushville IL 62681-

Purpose of Disbursement:
 Teleconferencing

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117887.57

Date M M / D D / Y Y Y Y
 06 / 18 / 2008

Transaction ID: H480710.E13908

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.67

66.98

104.65

C. Full Name (Last, First, Middle Initial)
 First United Methodist Church

Mailing Address

600 State Street

City State Zip Code

Salem OR 97301-

Purpose of Disbursement:
 Office Rent

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

122971.29

Date M M / D D / Y Y Y Y
 06 / 27 / 2008

Transaction ID: H480710.E13909

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

468.00

832.00

1300.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

530.15

942.50

1472.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 65 / 69
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

 Purpose of Disbursement:
Business Reply Mail (Postage)
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118087.57

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	8	/	2	0	0	8

Transaction ID: H480710.E13910

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00		128.00		200.00

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

 Purpose of Disbursement:
PO Box Rental
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118171.57

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	8	/	2	0	0	8

Transaction ID: H480710.E13911

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.24		53.76		84.00

C. Full Name (Last, First, Middle Initial)
South Salem Mini Storage

Mailing Address

5585 SE Commercial St

City	State	Zip Code
Salem	OR	97306-

 Purpose of Disbursement:
Storage Rental
Category/
Type
 Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117782.92

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	8	/	2	0	0	8

Transaction ID: H480710.E13912

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.00		96.00		150.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.24		277.76		434.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 66 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Complete Campaigns

Mailing Address

610 Gateway Center Way Ste K

City	State	Zip Code
San Diego	CA	92102-4548

Purpose of Disbursement:
 Database system

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

121671.29

Date

M	M
0	6

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480710.E13913

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

B. Full Name (Last, First, Middle Initial)
 Office Depot

Mailing Address

10520 SW Cascade Blvd

City	State	Zip Code
Tigard	OR	97223-

Purpose of Disbursement:
 Office supplies

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120402.56

Date

M	M
0	6

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480710.E13917

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.16		19.83		30.99

C. Full Name (Last, First, Middle Initial)
 Aristotle

Mailing Address

205 Pennsylvania Ave SE

City	State	Zip Code
Washington	DC	20003-

Purpose of Disbursement:
 Software & support

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120371.57

Date

M	M
0	6

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480710.E13919

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
702.00		1248.00		1950.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
893.16		1587.83		2480.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 67 / 69
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118421.57

Date 06 / 18 / 2008

Transaction ID: H480710.E13920

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

B. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

121171.29

Date 06 / 27 / 2008

Transaction ID: H480710.E13921

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

C. Full Name (Last, First, Middle Initial)
Dell Financial

Mailing Address

PO Box 120001

City State Zip Code

Dallas TX 75312-

Purpose of Disbursement:
Equipment LeaseCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120597.16

Date 06 / 27 / 2008

Transaction ID: H480710.E13923

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

70.06

124.54

194.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

250.06

444.54

694.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 68 / 69
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Integra Telecom

Mailing Address

PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:
 Telephone

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120921.29

Date

M	M
0	6

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480710.E13924

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.69		207.44		324.13

B. Full Name (Last, First, Middle Initial)
 Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City	State	Zip Code
Louisville	KY	40285-

Purpose of Disbursement:
 Postage Machine Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112413.17

Date

M	M
0	6

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H480716.E14063

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
476.69		847.44		1324.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
8211.80	14598.75	22810.55

Form/Schedule:**F3XN**
Transaction ID:

Memo: In order for the committees software to itemize the ultimate vendors for the Discover Corporate Card disbursement on 06/03/2008, it was necessary to show a negative amount incurred on Schedule D instead of a payment for that account. The payment was \$500, however additional debt incurred was \$305.25. Therefore the negative amount incurred shows as \$-194.75